

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SO	71058	5 12 98
O.I.P.E. CLASSIFIER		16	5 18 98
FORMALITY REVIEW		68418	6 27 98

### INDEX OF CLAIMS

Rejected N  
 Allowed A  
 (Through numeral) Canceled  
 Restricted O  
 Non-elected  
 Interference  
 Appeal  
 Objected

Claim	Date	Claim	Date	Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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